

PABST PATENT GROUP 

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TELEFAX

Date: December 12, 2008 **Total pages:** 4 (w/cover page)
To: USPTO **Telephone:** **Telefax:** 571-273-8300
From: Patrea L. Pabst **Telephone:** 404-879-2151 **Telefax:** 404-879-2160
Our Docket No. MBX 039 **Client/Matter No.** 077832/00074
Your Docket No.

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MESSAGE:

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appellants: Frank A. Skraly and Martha Sholl

Serial No.: 09/909,574

Art Unit: 1652

Filed: July 20, 2001

Examiner: Yong D. Pak

For: *PRODUCTION OF POLYHYDROXYALKANOATES FROM POLYOLS*

Attached:
Notice of Hearing
Transmittal Form PTO/SB/21
Fee Transmittal PTO/SB/17

45093600

MBX 039
077832/00074



UNITED STATES PATENT AND TRADEMARK OFFICE

Board of Patent Appeals and Interferences

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PATREA L. PABST
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ATLANTA, GA 30361

Appeal No: 2008-4223
Appellant: Frank A. Skraly, Martha Sholl et al.
Application No: 09/909,574
Hearing Room: A
Hearing Docket: B
Hearing Date: Thursday, January 15, 2009
Hearing Time: 01:00 PM
Location: Madison Building - East Wing
600 Dulany Street, 9th Floor
Alexandria, Virginia 22313-1450

NOTICE OF HEARING
CONFIRMATION REQUIRED WITHIN TWENTY-ONE DAYS

Your attention is directed to 37 CFR § 41.47. The above identified appeal will be heard by the Board of Patent Appeals and Interferences on the date indicated. Hearings will commence at the time set and as soon as the argument in one appeal is concluded, the succeeding appeal will be taken up. The time allowed for argument is twenty minutes unless additional time is requested and permitted before the argument is commenced. If there are any inquiries, please contact the Clerk of the Board at 571-272-9797.

The application involved in this appeal has been published. Accordingly, the hearing in this appeal is open to the public.

CONFIRMATION OR WAIVER OF THE HEARING IS REQUIRED. This form must be completed below and facsimile transmitted to both: (1) the USPTO Central fax number (official copy), and (2) the Board of Patent Appeals and Interferences fax number (courtesy copy) within TWENTY-ONE (21) DAYS from the mailing date of this notice indicating confirmation or waiver of the hearing. A copy of this notice may be alternately filed by mail if facsimile is not available.

BPAI HEARINGS FAX No: (571) 273-0299

USPTO Central Fax No: (571) 273-8300

BPAI Mailing Address: Board of Patent Appeals and Interferences
United States Patent and Trademark Office
P.O. BOX 1450
Alexandria, Virginia 22313-1450

In all communications relating to this appeal, please identify the appeal by its number.

CHECK ONE: ☒ HEARING ATTENDANCE CONFIRMED ☐ HEARING ATTENDANCE WAIVED

Signature of Attorney/Agent/Appellant: Patrea L. Pabst Date: Dec. 12, 2008 Registration No.: 31,284

Names of other visitors expected to accompany counsel: Dr. Oliver Peoples

For information on visitor access to hearing rooms and security procedures at the USPTO Alexandria Campus, see <http://www.uspto.gov/wcb/offices/learn/accounsel/contact.htm#bpaicontacts>

Dec. 12. 2008 10:49AM

No. 2911 P. 3

PTO/SB/17 (10-07)

Approved for use through 08/30/2010. OMB 0851-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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Effective on 12/08/2004.

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL
For FY 2008☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$)

Complete if Known

Application Number 09/909,574
 Filing Date July 20, 2001
 First Named Inventor Frank A. Skraly
 Examiner Name Yong D. Pak
 Art Unit 1652
 Attorney Docket No. MBX 039

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CENTRAL FAX CENTER**DEC 12 2008****METHOD OF PAYMENT (check all that apply)**

- ☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____
- ☐ Deposit Account Deposit Account Number: 503129 Deposit Account Name: Pabst Patent Group LLP
- For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)
- ☐ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee
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FEE CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	310	155	510	255	210	105	
Design	210	105	100	50	130	65	
Plant	210	105	310	155	160	80	
Reissue	310	155	510	255	620	310	
Provisional	210	105	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	210	105
Multiple dependent claims	370	185
Total Claims		
Extra Claims	Fee (\$)	Fee Paid (\$)
- 20 or HP = _____ x _____ = _____		
HP = highest number of total claims paid for, if greater than 20.		
Indep. Claims		
Extra Claims	Fee (\$)	Fee Paid (\$)
- 3 or HP = _____ x _____ = _____		
HP = highest number of independent claims paid for, if greater than 3.		

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets _____ Extra Sheets _____ Number of each additional 50 or fraction thereof _____ Fee (\$) _____ Fee Paid (\$) _____

- 100 = _____ / 50 = _____ (round up to a whole number) x _____ = _____

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): _____

SUBMITTED BY

Signature _____ Registration No. 31,284 Telephone 404-879-2151

Name (Print/Type) Patrea L. Pabst Date December 12, 2008

This collection of information is required by 37 CFR 1.138. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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No. 2911 P. 4

PTO/SB/21 (09-04)

Approved for use through 07/31/2008. OMB 0851-0031

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(to be used for all correspondence after initial filing)

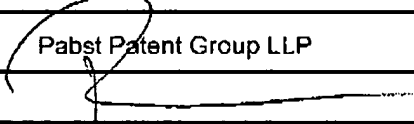
Total Number of Pages in This Submission

Application Number 09/009,574Filing Date July 20, 2001First Named Inventor Frank A. SkralyArt Unit Yong D. PakExaminer Name 1652Attorney Docket Number MBX 039

ENCLOSURES (Check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	Notice of Hearing
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Reply to Missing Parts/Incomplete Application	<input type="checkbox"/> Landscape Table on CD	
<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	Remarks	

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	<u>Pabst Patent Group LLP</u>		
Signature			
Printed name	<u>Patricia L. Pabst</u>		
Date	<u>December 12, 2008</u>	Reg. No.	<u>31,284</u>

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Signature	<u>Claudia Lorenz</u>	Date	<u>December 12, 2008</u>
Typed or printed name	<u>Claudia Lorenz</u>		

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